Case 21-32634-KRH Doc 14 Filed 09/10/21 Entered 09/10/21 14:52:36 Desc Main Document Page 1 of 44

Fill in this infor					
Debtor 1	Sheena Monique	Hatch			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	OF VIRGINIA		
Case number	21-32634				
(if known)	21 02007				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

t 1: Summarize Your Assets		
	Your as	ssets f what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,376.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	10,376.00
t 2: Summarize Your Liabilities		
		abilities you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	45,696.0
Your total liabilities	\$	45,696.00
t 3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,898.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,018.00
t 4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	r other sch	edules.
■ Yes What kind of debt do you have?		
	1a. Copy line 55, Total real estate, from Schedule A/B	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Debtor 1 Sheena Monique Hatch Case number (if known) 21-32634

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____6,674.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	38,234.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	38,234.00

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Fill in this inform	nation to identify your case and this filing:	
Debtor 1	Sheena Monigue Hatch	
	First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing)	First Name Middle Name Last Name	
United States Ba	nkruptcy Court for the: EASTERN DISTRICT OF VIRGINIA	
Case number	21-32634	☐ Check if this is an
		amended filing
Official Fo	rm 106A/B	
Schedul	e A/B: Property	12/15
	eparately list and describe items. List an asset only once. If an asset fits in more than one category,	
	e as complete and accurate as possible. If two married people are filing together, both are equally re e space is needed, attach a separate sheet to this form. On the top of any additional pages, write you tion.	
Part 1: Describe	Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In	
1. Do you own or h	nave any legal or equitable interest in any residence, building, land, or similar property?	
_		
No. Go to Par		
☐ Yes. Where is	s the property?	
Part 2: Describe	Your Vehicles	
	se, or have legal or equitable interest in any vehicles, whether they are registered or not ves. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Legal 1.	
3. Cars, vans, tro	ucks, tractors, sport utility vehicles, motorcycles	
■ No		
☐ Yes		
— 103		
	rcraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessor ts, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	ies
■ No		
☐ Yes		
	er value of the portion you own for all of your entries from Part 2, including any entries fo ave attached for Part 2. Write that number here	
.pages you na	ive attached for Fart 2. write that humber here	
Part 3: Describe	Your Personal and Household Items	
Do you own or h	nave any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: Ma	oods and furnishings ajor appliances, furniture, linens, china, kitchenware	
Yes. Descri	ribe	
	Household Goods & Furnishings	\$2,500.00

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Official Form 106A/B Schedule A/B: Property page 1

Entered 09/10/21 14:52:36 Case 21-32634-KRH Doc 14 Filed 09/10/21 Desc Main Document Page 4 of 44 Debtor 1 **Sheena Monique Hatch** Case number (if known) 21-32634 Yes. Describe..... \$2,000.00 Cell Phone, 5 TV's, 3 laptops, 1 printer, and Misc. Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No

11. Clothes
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories
□ No
■ Yes. Describe.....

Women's Clothing \$500.00

12. **Jewelry** *Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

Yes. Describe.....

☐ Yes. Describe.....

Wedding and Engagement Rings \$1,000.00

Misc. Jewelry \$300.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

□ No

Yes. Describe.....

1 Dog \$10.00

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$6,310.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

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De	ebtor 1	Sheena Monique	ue Hatch		Case number (if known) 21-32	2634
16.	Cash Examp □ No	oles: Money you hav	ve in your wallet, in you	ur home, in a safe deposit box, a	and on hand when you file your petition	
	Yes					
					Cash on Hand	\$10.00
	Examp			accounts; certificates of deposit;	; shares in credit unions, brokerage houses, st each.	and other similar
	□ No ■ Yes			Institution name:		
			17.1. Debit Card	Branch DebCard		\$1.00
18.	Bonds	, mutual funds, or	publicly traded stock	(S		
	_Examp			h brokerage firms, money marke	et accounts	
	■ No		Institution or iss	wor name:		
	⊔ Yes		institution or iss	suer name.		
19.	joint v	ublicly traded stoc enture	k and interests in inc	orporated and unincorporated	d businesses, including an interest in an	LLC, partnership, and
	■ No	Give specific inform	nation about them			
	— 103.	Oive specific inform	Name of entity:		% of ownership:	
20.	Negoti	<i>iable instruments</i> ind	clude personal checks	negotiable and non-negotiable , cashiers' checks, promissory not transfer to someone by signing	otes, and money orders.	
	_	Give specific inform	nation about them			
			Issuer name:			
21.		ment or pension acoles: Interests in IRA		k), 403(b), thrift savings account	ts, or other pension or profit-sharing plans	
		List each account s	eparately.			
			Type of account:	Institution name:		
22.	Your s Examp		deposits you have mad	le so that you may continue serv ent, public utilities (electric, gas,	vice or use from a company water), telecommunications companies, or o	others
	■ No □ Yes			Institution name or in	ndividual:	
22				and the second state of the second se		
23.	■ No	iles (A contract for a	a periodic payment of r	noney to you, either for life or for	r a number or years)	
	☐ Yes	lssue	er name and description	n.		
24.			IRA, in an account in 9A(b), and 529(b)(1).	a qualified ABLE program, or	under a qualified state tuition program.	
	■ No □ Yes	Instit	tution name and descri	ption. Separately file the records	s of any interests.11 U.S.C. § 521(c):	
25.		, equitable or futur	e interests in proper	ty (other than anything listed i	n line 1), and rights or powers exercisabl	e for your benefit
	■ No □ Yes.	Give specific inform	nation about them			
26.	Examp			s, and other intellectual proper oceeds from royalties and licensi	-	
	■ No □ Yes.	Give specific inform	nation about them			

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Case number (if known) 21-32634

De	ebtor 1	Sheena Monique Hatch		(Case number (if known)	21-32634
27.		es, franchises, and other generalles: Building permits, exclusive lice		ooldings liquor licens	ses professional licens	00
	■ No	res. Building permits, exclusive ild	enses, cooperative association i	iolalings, liquol licens	ses, professional licensi	55
		Give specific information about th	nem			
Mo	oney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refu □ No	unds owed to you				·
	Yes. 0	Give specific information about the	em, including whether you alread	ly filed the returns an	nd the tax years	
			Anticipated 2020 Tax Refu	ınds	Federal	\$4,055.00
	■ No	support les: Past due or lump sum alimon Give specific information	y, spousal support, child support	, maintenance, divor	ce settlement, property	settlement
	Examp	amounts someone owes you bles: Unpaid wages, disability insu benefits; unpaid loans you m Give specific information		its, sick pay, vacatior	າ pay, workers' comper	nsation, Social Security
		ts in insurance policies ples: Health, disability, or life insura	ance; health savings account (HS	SA); credit, homeown	ner's, or renter's insurar	nce
	Yes.	Name the insurance company of e Company n		Beneficia	ry:	Surrender or refund value:
		Life Insur	ance Policy- Term	Mother		Unknown
	If you a someon	erest in property that is due you are the beneficiary of a living trust, ne has died. Give specific information		rance policy, or are o	currently entitled to rece	eive property because
	Examp ■ No	against third parties, whether of ples: Accidents, employment dispute the properties of the properties			for payment	
	■ No	contingent and unliquidated clair Describe each claim	ims of every nature, including	counterclaims of th	e debtor and rights to	set off claims
	■ No	ancial assets you did not alread	dy list			
	6. Add th	he dollar value of all of your ent	tries from Part 4, including any	entries for pages y	ou have attached	\$4.066.00

Official Form 106A/B Schedule A/B: Property page 4 Case 21-32634-KRH Doc 14 Filed 09/10/21 Entered 09/10/21 14:52:36 Desc Main Document Page 7 of 44

	Document	raye / Ul 2		
Debt	or 1 Sheena Monique Hatch		Case number (if known)	21-32634
Part !	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real est	ate in Part 1.	
37. D e	 o you own or have any legal or equitable interest in any business-relat	ted property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part (Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Intere	st In.	
46. D	o you own or have any legal or equitable interest in any farm	or commercial fishin	ng-related property?	
	No. Go to Part 7.			
ĺ	Yes. Go to line 47.			
Part 7	7: Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	Po you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information	?		
54.	Add the dollar value of all of your entries from Part 7. Write the	nat number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$6,310.00		
58.	Part 4: Total financial assets, line 36	\$4,066.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$10,376.00	Copy personal property to	otal \$10,376.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$10.376.00

Official Form 106A/B Schedule A/B: Property page 5

\$10,376.00

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Fill in this infor					
Debtor 1	Sheena Monique	Hatch			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F VIRGINIA		
Case number	21-32634				
(if known)				_	Check if this i amended filin

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property	You Claim	as Exempt
---------	--------------	----------	-----------	-----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amou	nt of the exemption you claim	Specific laws that allow exemptio
	Copy the value from Schedule A/B	Check	only one box for each exemption.	
Household Goods & Furnishings Line from Schedule A/B: 6.1	\$2,500.00		\$2,500.00	Va. Code Ann. § 34-26(4a)
Line nom ochedale AVB. 4.1			100% of fair market value, up to any applicable statutory limit	
Cell Phone, 5 TV's, 3 laptops, 1 printer, and Misc. Electronics	\$2,000.00		\$2,000.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Women's Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	Va. Code Ann. § 34-26(4)
Ellie Holli Goriodale 772.			100% of fair market value, up to any applicable statutory limit	
Wedding and Engagement Rings Line from Schedule A/B: 12.1	\$1,000.00		\$1,000.00	Va. Code Ann. § 34-26(1a)
Line nom ochedale AVB. 12.1			100% of fair market value, up to any applicable statutory limit	
Misc. Jewelry Line from Schedule A/B: 12.2	\$300.00		\$300.00	Va. Code Ann. § 34-4
LINE HOITI Scriedule A/D. 12.2			100% of fair market value, up to	

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DE	Sneena wonique natch			Case number (ii known)	21-32034
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	1 Dog Line from Schedule A/B: 13.1	\$10.00		\$10.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(5)
	Cash on Hand Line from Schedule A/B: 16.1	\$10.00		\$10.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
	Debit Card: Branch DebCard Line from Schedule A/B: 17.1	\$1.00		\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
	Federal: Anticipated 2020 Tax Refunds Line from Schedule A/B: 28.1	\$4,055.00		\$4,055.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(9)
	Federal: Anticipated 2020 Tax Refunds Line from <i>Schedule A/B</i> : 28.1	\$4,055.00		\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
	Life Insurance Policy- Term Beneficiary: Mother Line from Schedule A/B: 31.1	Unknown		100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 38.2-3122
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every ■ No □ Yes. Did you acquire the property cover □ No □ Yes	3 years after that for ca	ases fi	·	,

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Fill in this information to identify your case:						
Debtor 1						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name	_		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	DF VIRGINIA			
Case number	21-32634					
(if known)					☐ Check if this is an amended filing	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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		L	ocument	Page 11	L Of 44		
Fill in thi	s information to identify your o	case:					
Debtor 1	Sheena Monique	Hatch					
20010	First Name	Middle Na	me	Last Name			
Debtor 2							
(Spouse if, fi	ling) First Name	Middle Na	me	Last Name			
United St	ates Bankruptcy Court for the:	EASTERN D	ISTRICT OF VIR	RGINIA			
Caaa n	ohor 04 22024						
Case nun (if known)	nber <u>21-32634</u>		-			П	Check if this is an
` ,						_	mended filing
							· ·
	Form 106E/F						
<u>Sched</u>	ule E/F: Creditors W	ho Have	Unsecured	l Claims			12/15
Schedule (Schedule E eft. Attach name and (ory contracts or unexpired leases Executory Contracts and Unexpi C Creditors Who Have Claims Sect the Continuation Page to this pag case number (if known).	ired Leases (Off ured by Propert e. If you have n	icial Form 106G). y. If more space is o information to re	Do not include needed, copy	any creditors with partially see	cured claims imber the en	that are listed in tries in the boxes on the
Part 1:	List All of Your PRIORITY Un						
_	y creditors have priority unsecured	u ciaiilis agailis	i you r				
■ No	. Go to Part 2.						
⊔ Ye	S.						
Part 2:	List All of Your NONPRIORIT	Y Unsecured	Claims				
3. Do an	- y creditors have nonpriority unsec	ured claims aga	ainst you?				
□ No	. You have nothing to report in this pa	art. Submit this fo	orm to the court with	h vour other sche	edules.		
_				,			
■ Ye	S.						
unsec	Il of your nonpriority unsecured cla ured claim, list the creditor separately ne creditor holds a particular claim, list.	for each claim.	For each claim liste	ed, identify what t	ype of claim it is. Do not list clair	ns already ind	cluded in Part 1. If more
							Total claim
4.1 A	d Astra Recovery		Last 4 digits of ac	count number	9090		\$784.00
	onpriority Creditor's Name						
	330 West 33rd Street North Juite 118		When was the deb	at incurred?	Opened 09/19 Last Ac 05/19	ctive	
	Vichita, KS 67205		wilen was the der	ot iliculteur	03/19		=
_	umber Street City State Zip Code		As of the date you	ı file, the claim i	is: Check all that apply		
W	/ho incurred the debt? Check one.						
	Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	Debtor 1 and Debtor 2 only		☐ Disputed				
	$oldsymbol{1}$ At least one of the debtors and and	Julei	Type of NONPRIO	RITY unsecured	d claim:		
	Check if this claim is for a comm	nunity	Student loans				
	ebt the claim subject to offset?		Obligations aris priority cla		ration agreement or divorce that	you did not	
	No				g plans, and other similar debts		
_	- NU		— Dobio to pensio	•	Attorney Speedycash.C	om	
	Yes		Other. Specify	169-Va	Autorney Speedycash.C	Oill	_

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Debio	Sileelia Moriique Hatcii		Case number (ii known) 21-32034	
4.2	LVNV Funding LLC	Last 4 digits of account number	4295	\$2,700.00
	Nonpriority Creditor's Name ATTN BANKRUPTCY 200 Meeting Street, Ste #206 Greenville, SC 29601	When was the debt incurred?	2021	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Closed Acc	count	
4.3	Medical Data Systems Inc	Last 4 digits of account number	6044	\$341.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960	When was the debt incurred?	Opened 09/19 Last Active 11/18	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Medical De	bt	
4.4	Merrick Bank/CardWorks	Last 4 digits of account number	5285	\$835.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 04/18 Last Active 9/26/18	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<u></u>	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	□ Yes			
	□ res	Other. Specify Credit Card	4	

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Debtor	1 Sheena Monique Hatch		Case number (if known) 21-32634					
4.5	Mw Fidel Svc	Last 4 digits of account number	5023	\$793.00				
	Nonpriority Creditor's Name	_						
	103 S Main Street Ottawa, KS 66067	When was the debt incurred?	Opened 6/15/17 Last Active 01/16					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	□ Yes	■ Other Specify Consumer						
	Li Yes	Other. Specify Consumer	Dept					
4.6	National Credit Adjusters, LLC	Last 4 digits of account number	1699	\$250.00				
	Nonpriority Creditor's Name 327 West 4th Avenue Po Box 3023	When was the debt incurred?	Opened 08/20 Last Active 11/20/20					
	Hutchinson, KS 67504 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	,						
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only							
	☐ Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	Obligations arising out of a separation agreement or divorce that you did not ort as priority claims					
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts					
	☐Yes	■ Other. Specify Missouri Specify	Company Account The Bank Of /B/M Mab					
4.7	Navient	Last 4 digits of account number	0425	\$4,549.00				
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9500	When was the debt incurred?	Opened 02/08 Last Active 7/20/21					
	Wilkes-Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	_	☐ Contingent						
	Debtor 1 only	Unliquidated						
	Debtor 2 only							
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:					
	At least one of the debtors and another	Student loans						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not					
	•	report as priority claims Debts to pension or profit-sharir	a plane, and other similar debte					
	■ No		y pians, and other similal debts					
	Yes	Other. Specify						

Educational

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1 Sheepa Monique Hatch Case number (if known) 21-32634

Dept	or 1 Sneena Monique Hatch		Case number (if known) 21-32634	
4.8	Navient	Last 4 digits of account number	0425	\$3,487.00
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9500 Wilkes-Barre, PA 18773	When was the debt incurred?	Opened 06/07 Last Active 7/20/21	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify	<u> </u>	
		Educationa	ll	
4.9	Navient	Last 4 digits of account number	0425	\$3,044.00
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9500 Wilkes-Barre, PA 18773	When was the debt incurred?	Opened 06/07 Last Active 7/20/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	ıl	
4.1 0	Peoples Advantage Credit Union	Last 4 digits of account number	0012	\$150.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3180 Petersburg, VA 23805	When was the debt incurred?	Opened 07/18 Last Active 02/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Unsecured		

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Debtor	1 Sheena Monique Hatch		Case number (if known) 21-32634						
4.1	Receivable Management Inc	Last 4 digits of account number	5537	\$95.00					
1	Nonpriority Creditor's Name	Last 4 digits of account number		ψ33.00					
	7206 Hull Road		Opened 07/16 Last Active						
	Suite 211	When was the debt incurred?	04/16						
	Richmond, VA 23235	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply							
	Who incurred the debt? Check one.	7.5 or the date you me, the claim.	o. Oncor all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	_	☐ Student loans	. J.						
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims	ration agreement of avoice that you did not						
	No	Debts to pension or profit-sharin	g plans, and other similar debts						
	Yes	Other. Specify Medical De	bt						
4.1				*****					
2	Resurgent Capital Services Nonpriority Creditor's Name	Last 4 digits of account number	6035	\$644.00					
	Attn: Bankruptcy		Opened 04/19 Last Active						
	Po Box 10497	When was the debt incurred?	09/18						
	Greenville, SC 29603								
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply						
	_								
	Debtor 1 only	Contingent							
	Debtor 2 only	Unliquidated							
	Debtor 1 and Debtor 2 only	Disputed							
	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:								
	☐ Check if this claim is for a community debt	☐ Student loans							
	ls the claim subject to offset?	Obligations arising out of a sepa report as priority claims							
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
	Yes	■ Other. Specify Bank N.A.	■ Other. Specify Bank N.A.						
4.1	Synchrony Bank/Gap	Last 4 digits of account number	4317	\$390.00					
<u> </u>	Nonpriority Creditor's Name			· · · · · · · · · · · · · · · · · · ·					
	Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 12/05 Last Active 12/13						
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i							
	■ Debtor 1 only	☐ Contingent							
	□ Debtor 2 only □ Unliquidated								
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed							
		Type of NONPRIORITY unsecured claim:							
	At least one of the debtors and another	Student loans	. VIG						
	Check if this claim is for a community debt		ration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims	adding agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
	□Yes	■ Other, Specify Charge Acc	count						

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Debtor	1 Sheena M	Ionique Hatch		Case nu	Imber (if known) 21-32634	
4.1		he Bank of Missouri	Last 4 digits of account number	1699		\$480.00
	Nonpriority Cred Attn: Bankr Po Box 857 Sioux Falls	uptcy 10	When was the debt incurred?	Open 11/18	ned 6/30/18 Last Active	-
•	Number Street	City State Zip Code	As of the date you file, the claim	is: Check	all that apply	
	Who incurred t	the debt? Check one.				
	Debtor 1 onl	ly	☐ Contingent			
	Debtor 2 onl	ly	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
		s claim is for a community	Student loans			
	debt Is the claim su	bject to offset?	Obligations arising out of a sep report as priority claims	aration ag	reement or divorce that you did not	
	■ No		Debts to pension or profit-shari	ng plans, a	and other similar debts	
	Yes		Other. Specify Credit Car	d		-
4.1 5	USDOE/GLI Nonpriority Cred	-	Last 4 digits of account number	8581		\$27,154.00
	Attn: Bankr	uptcy	When was the debt incurred?		ned 09/19 Last Active	
	Madison, W		when was the debt incurred?	7/01/2	21	-
		City State Zip Code	As of the date you file, the claim	is: Check	all that apply	
	Who incurred t	the debt? Check one.	_			
	Debtor 1 onl	ly	☐ Contingent			
	Debtor 2 onl	ly	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
		s claim is for a community	Student loans			
	debt Is the claim su	bject to offset?	report as priority claims	J	reement or divorce that you did not	
	No		Debts to pension or profit-shari	ng plans, a	and other similar debts	
	☐ Yes		Other. Specify			_
Dort 2	List Others	a to Bo Notified About a Dobt	Education	al		
is tryir have r notifie	nis page only if y ng to collect fro more than one c ed for any debts	m you for a debt you owe to some creditor for any of the debts that y in Parts 1 or 2, do not fill out or	out your bankruptcy, for a debt that eone else, list the original creditor i you listed in Parts 1 or 2, list the add submit this page.	n Parts 1 litional cre	or 2, then list the collection agence editors here. If you do not have ad	y here. Similarly, if you
	nd Address Peters & Da		n which entry in Part 1 or Part 2 did you ne 4.2 of (<i>Check one):</i>	_	riginal creditor? Creditors with Priority Unsecured Cla	ims
	Ritchie Hwt				Creditors with Nonpriority Unsecured	
Suite 3				- 1 alt 2. V	orealists with Nonpholity Shocoarea	Olainis
Pasad	lena, MD 211		ast 4 digits of account number			
Part 4:	Add the Ar	mounts for Each Type of Uns	ecured Claim			
6. Total t		certain types of unsecured claim	s. This information is for statistical	reporting	purposes only. 28 U.S.C. §159. Ad	d the amounts for each
	60	Domestic support chliquisms		60	Total Claim	
Total	6a.	Domestic support obligations		6a.	\$	_
claims	.r.4.4 CL	Tayon and partain ather dalars	you awa the government	6 h	¢ 2.22	
from Pa	rt 1 6b. 6c.	Taxes and certain other debts y Claims for death or personal in	-	6b. 6c.	\$ <u>0.00</u> \$ 0.00	_
	6d.	•	cured claims. Write that amount here.	6d.	\$ 0.00	_

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Debtor 1	Sheena M	lonique Hatch		umber (if known)	21-32634
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Tota	l Claim
	6f.	Student loans	6f.	\$	38,234.00
ıs					·
Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	7,462.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	45.696.00

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Fill in this information	n to identify your	case:	Ü	
Debtor 1 SI	heena Monique	Hatch		
Fir	rst Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing) Fire	rst Name	Middle Name	Last Name	
United States Bankrup	otcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number 21-32	2634			
(if known)				☐ Cl
				an

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Oldio	211 0000	
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5)		• • • • • • • • • • • • • • • • • • • •	2 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	nı Page 19 0	11 44	
Fill in this	information to identify your	case:			
Debtor 1	Chana Manigua	Uetek			
Debioi i	Sheena Monique First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA		
Case numl	ber 21-32634				
(if known)					☐ Check if this is an
					amended filing
O.(;; ;	15 40011				
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
No Yes 2. With Arizon No. Yes 3. In Colin line Form	hin the last 8 years, have you as, California, Idaho, Louisiana Go to line 3. S. Did your spouse, former spout umn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official	u lived in a community property, Nevada, New Mexico, Pu use, or legal equivalent live tors. Do not include your	roperty state or territor lerto Rico, Texas, Wash e with you at the time? spouse as a codebtor ttor or cosigner. Make	ry? (Community proper ington, and Wisconsin. if your spouse is filli sure you have listed	nty states and territories include) ng with you. List the person shown the creditor on Schedule D (Official, Schedule E/F, or Schedule G to fill
	olumn 2. Column 1: Your codebtor			Column 2: The cr	reditor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedu	
0.4				Под 11 5 "	
3.1	Name			_ U Schedule D, li	
	ramo			☐ Schedule E/F,	
				☐ Schedule G, li	ne
-	Number Street			_	
	City	State	ZIP Code		
20				O collectule D. P.	
3.2	Name			_ Schedule D, li	
				☐ Schedule E/F,	
				☐ Schedule G, li	ne
	Number Street				
	City	State	ZIP Code		

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Debtor 1 Sheena Monique Hatch Debtor 2 (Spoose, & Ilmigh) United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: MM / DD/YYYY	Fill	in this information to identify your c	ase:						
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number (**Theomy) A supplement showing postpetition chapter 13 income as of the following date: A supplement showing postpetition chapter 13 income as of the following date: MM / DD / YYYY Schedule I: Your Income MM / DD / YYYY									
Case number (If known) Check if this is: An amended filling A supplement showing postpetition chapter 13 incomes of the following date: MM / DD/YYYY Schedule I: Your Income MM / DD/YYYY						_			
Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for spusplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separated sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part II: Describe Employment 1. Fill in your employment information about additional employers. Debtor 1 Debtor 2 or non-filing spouse Employed Debtor 1 Debtor 2 or non-filing spouse Employed Not employed	Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF VIRGINIA					
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1:							☐ An amended☐ A suppleme	nt showing postpetition	chapter
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is ing witing with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation way include student or homemaker, if it applies. Employer's name Employer's name Employer's address Occupation way include student or homemaker, if it applies. Employer's address ATTN: WMSC Payroll Dept 1001 Fannin Street, Suite 4000 Houston, TX 77002 How long employed there? 20 Years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. \$ 0.00 \$ 5,459.00 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ 0.00	O [.]	fficial Form 106l							
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1:		_	ome				MM / DD/ Y	YYY	12/15
information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Employed Not employed Heavy Equipment Operator Waste Management ATTN: WMSC Payroll Dept 1001 Fannin Street, Suite 4000 Houston, TX 77002 How long employed there? 20 Years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ 5,459.00 3. Estimate and list monthly overtime pay.	sup spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and your s th you, do not inclu	spouse i de inforr	s livin nation	g with you, inclu about your spo	ide information about use. If more space is r	your leeded,
attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Cocupation may include student or homemaker, if it applies. Employer's address Employer's address Employer's address ATTN: WMSC Payroll Dept 1001 Fannin Street, Suite 4000 Houston, TX 77002 How long employed there? 20 Years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ 5,459.00 3. Estimate and list monthly overtime pay.	1.			Debtor 1			Debtor 2	or non-filing spouse	
Include part-time, seasonal, or self-employed work. Occupation Employer's name Employer's name Cocupation may include student or homemaker, if it applies. Employer's address How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ 5,459.00 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ 0.00			Empleyment status	☐ Employed			■ Emplo	yed	
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ 5,459.00 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ 0.00		information about additional	Employment status	■ Not employed			☐ Not er	nployed	
Self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Cocupation may include student or homemaker, if it applies. Employer's address How long employed there? Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ 5,459.00 3. Estimate and list monthly overtime pay.		employers.	Occupation	Unemployed			Heavy E	quipment Operator	
The sport of the space of the s			Employer's name	-			Waste N	l anagement	
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ 5,459.00 S. Estimate and list monthly overtime pay.			Employer's address				1001 Fa	nnin Street, Suite 40	000
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$			How long employed the	here?			2	0 Years	
If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse	Par	t 2: Give Details About Mor	nthly Income						
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ 5,459.00 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ 0.00	spou If yo	use unless you are separated. u or your non-filing spouse have mo	ore than one employer, co	, c	•	,		,	J
 deductions). If not paid monthly, calculate what the monthly wage would be. \$ 0.00 \$ 5,459.00 Estimate and list monthly overtime pay. \$ 0.00 +\$ 0.00 						F	For Debtor 1		
	2.				2.	\$_	0.00	\$5,459.00	
4. Calculate gross Income. Add line 2 + line 3. 4. \$ \$ \$ \$ \$ \$ \$	3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$0.00	
	4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	0.00	\$5,459.00_	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Sheena Monique Hatch	<u> </u>	Case number (if known)	21-32634	
	Con	vy line 4 hore	4.	For Debtor 1	For Debtor 2 or non-filing spouse	
		y line 4 here	4.	\$0.00	\$5,459.00	
5.		all payroll deductions:	_			
	5a. 5b. 5c. 5d. 5e.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance	5a. 5b. 5c. 5d. 5e.	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ 962.00 \$ 0.00 \$ 316.00 \$ 0.00 \$ 546.00	
	5f.	Domestic support obligations	5f.	\$ 0.00	\$ 0.00	
	5g.	Union dues	5g.	\$ 0.00	\$ 0.00	
	5h.	Other deductions. Specify: Critical Illness ESPP	_ 5h.+	\$ 0.00 \$ 0.00	+ \$ <u>17.00</u> \$ 263.00	
		Child Opt Life	_	\$ 0.00	\$ 203.00	
		Employee Opt Life	_	\$ 0.00	\$ 41.00	
		Spouse Opt Life	_	\$ 0.00	\$ 1.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ 0.00	\$	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$3,311.00	
9.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: Amortized Tax Refunds	8f. 8g. 8h.+	\$ 0.00 \$ 0.00 \$ 1,215.00 \$ 0.00 \$ 0.00 \$ 186.00 \$ 1,401.00	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 + \$ 186.00	
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	1,401.00 + \$	3,497.00 = \$ 4,8	398.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend	.,		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainies			a. if it	398.00
13.		you expect an increase or decrease within the year after you file this form' No.	?		v.iiiiy iiii	
		Yes. Explain:				

Fill	in this informa	tion to identify y	our case:			Ī		
Deb		Sheena Mon		ch		Che	eck if this is: An amended filing	
	tor 2						A supplement show	ving postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankr	uptcy Court for the	EASTE	RN DISTRICT OF VIRGIN	IA		MM / DD / YYYY	
	e number 21 nown)	-32634						
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	ises				12/1
Be info	as complete a	and accurate as	s possible. eded, atta	If two married people ar ch another sheet to this				
Par	t 1: Descr	ibe Your House	ehold					
	■ No. Go to							
	☐ Yes. Doe	s Debtor 2 live	in a separ	ate household?				
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	□ No	•	•			
۷.	Do not list Debtor 2.	•	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		11	Yes
					Daughter		20	□ No
					Daugnter			■ Yes □ No
								☐ Yes
								□ No
2	De veur evr	anaaa inaliida	_					☐ Yes
3.	expenses of	enses include f people other t d your depende	:han $_{f \Box}$	No Yes				
Par	t 2: Estim	ate Your Ongoi	ing Month	y Expenses				
exp	imate your ex enses as of a blicable date.	penses as of y date after the	our bankr bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this f plemental <i>Schedul</i> e	form as a s e <i>J</i> , check t	upplement in a Cha the box at the top o	apter 13 case to report f the form and fill in the
				government assistance i				
	ficial Form 10		ia navo inc		our moomo		Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgag	je 4.	\$	585.00
	If not includ	led in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
		rty, homeowner'	s, or renter	's insurance		4b.		0.00
	4c. Home	maintenance, re	epair, and ι	ıpkeep expenses		4c.	\$	150.00
_		owner's associa				4d.	·	0.00
5.	Additional r	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

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Debtor 1	Sheena Monique Hatch	Case num	ber (if known)	21-32634
S. Utiliti	es;			
6a.	Electricity, heat, natural gas	6a.	\$	325.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	350.00
6d.	Other. Specify: Cell phones	6d.	\$	165.00
Food	and housekeeping supplies		\$	838.00
	care and children's education costs	8.	\$	0.00
Cloth	ing, laundry, and dry cleaning	9.	\$	250.00
	onal care products and services	10.	\$	175.00
	cal and dental expenses	11.		150.00
	sportation. Include gas, maintenance, bus or train fare.		<u> </u>	
	ot include car payments.	12.	\$	425.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	300.00
. Char	table contributions and religious donations	14.	\$	0.00
. Insur	ance.			
Do no	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	430.00
15d.	Other insurance. Specify:	15d.	\$	0.00
. Taxe	5. Do not include taxes deducted from your pay or included in lines 4 or 20.		· -	
	fy: Amortized personal property taxes	16.	\$	35.00
	Ilment or lease payments:		· -	
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify: Husband's Car Payment	17c.	· -	490.00
	Other. Specify: Husband's Credit Card Bill	17d.		100.00
	payments of alimony, maintenance, and support that you did not report as			100.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	r payments you make to support others who do not live with you.		\$	0.00
Spec		19.		
	r real property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
	r: Specify: Miscellaneous Expenses	21.	·	250.00
. Jule	iniocenaneous Expenses		- Ψ	230.00
. Calcı	ulate your monthly expenses			
22a.	Add lines 4 through 21.		\$	5,018.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	5,018.00
	The state of the s			0,010.00
	ılate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,898.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	5,018.00
23c.	Subtract your monthly expenses from your monthly income.	20	œ.	420.00
	The result is your monthly net income.	23c.	\$	-120.00
For ex	ou expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your cation to the terms of your mortgage?			ease or decrease because of a
□ Ye	es. Explain here:			

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Fill in this in	nformation to identify your	case:			
Debtor 1	Sheena Monique First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	EASTERN DISTRICT C	DF VIRGINIA		
Case numbe	21-32634				
(if known)				_	k if this is an nded filing
You must file		ile bankruptcy schedules	s or amended schedules.	ect information. Making a false statement, concealin n fines up to \$250,000, or imprisonm	
	Sign Below				
Did you	u pay or agree to pay some	one who is NOT an attor	rney to help you fill out ba	ankruptcy forms?	
■ No)				
☐ Ye	es. Name of person			Attach Bankruptcy Petition F Declaration, and Signature (•
	enalty of perjury, I declare y are true and correct.	that I have read the sum	ımary and schedules filed	d with this declaration and	
X /s/ 9	Sheena Monique Hatch		X		
She	eena Monique Hatch nature of Debtor 1		Signature of I	Debtor 2	
Date	e August 27, 2021		Date		

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Filli	in this info	rmation to identify you	r case:			
Deb	tor 1	Sheena Monique	Hatch			
D - I-	10	First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States E	Bankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Cas	e number	21-32634				
(if kno					_	check if this is an mended filing
						mended ming
~ · ·		4.07				
		orm 107			_	
Sta	itemer	nt of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
					equally responsible for sup	
		more space is needed, wn). Answer every ques		this form. On the top of any	y additional pages, write you	ır name and case
		,				
Part	Give	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is yo	our current marital statu	s?			
	■ Marrie	ed				
	_	arried				
2.	During the	e last 3 years, have you	lived anywhere other than	where you live now?		
	_		•	•		
	■ No □ Yes.I	int all of the places	in ad in the least 2 years. Do no	-		
	⊔ res. i	ist all of the places you i	ived in the last 3 years. Do no	of include where you live now	·.	
	Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
•	Maria I al	land 0		-1		
					ity property state or territory ico, Texas, Washington and W	
	_				_	
	■ No □ Yes.1	Maka aura yau fill aut Sal	andula H. Vaur Cadabtara (O	fficial Form 106H)		
	res. i	wake sure you iiii out S <i>cr</i>	nedule H: Your Codebtors (O	iliciai Form 100H).		
Part	Exp	ain the Sources of You	r Income			
4.	Did you be	avo any income from an	anloument or from energtin	a a business during this ve	ear or the two previous cale	ador vooro?
	Fill in the to	otal amount of income yo	u received from all jobs and a	all businesses, including part-	time activities.	idai years?
	If you are f	iling a joint case and you	have income that you receiv	e together, list it only once ur	nder Debtor 1.	
	□ No					
	Yes. I	Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and	Check all that apply.	(before deductions
_	_			exclusions)	_	and exclusions)
		1 of current year until led for bankruptcy:	■ Wages, commissions,	\$0.00	☐ Wages, commissions, bonuses, tips	
			bonuses, tips		_	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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				Debtor 1			Debtor 2		
				Sources of income Check all that apply.		s income re deductions and sions)		of income that apply.	Gross income (before deductions and exclusions)
	or last calen anuary 1 to		31, 2020)	■ Wages, commissions, bonuses, tips		\$867.18	☐ Wages bonuses,	s, commissions, tips	
				☐ Operating a business			☐ Opera	ting a business	
	or the calendary 1 to			■ Wages, commissions, bonuses, tips		\$23,081.70	☐ Wages bonuses,	s, commissions, tips	
				☐ Operating a business			☐ Opera	ting a business	
	winnings. List each s	lf you are fili	ng a joint cas	pensions; rental income; inte e and you have income that me from each source separa	you recei	ved together, list in	t only once un	der Debtor 1.	ia gambiing and lottery
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each	s income from source re deductions and sions)	Sources Describe	of income below.	Gross income (before deductions and exclusions)
	om January e date you t		nt year until kruptcy:	Unemployment		\$9,234.00)		
Pa 6.	Are either □ No.	Debtor 1's Neither Deindividual p During the No. Yes * Subject to	or Debtor 2' ebtor 1 nor Derimarily for a 90 days befo Go to line 7 List below e paid that cre not include to adjustment or Debtor 2 o 90 days befo Go to line 7 List below e include pay	ach creditor to whom you pa editor. Do not include payme payments to an attorney for on 4/01/22 and every 3 year r both have primarily const re you filed for bankruptcy, d	er debts? umer deb bld purpos did you pay aid a total ents for do this bankr rs after the umer deb did you pay	ots. Consumer dente." y any creditor a to of \$6,825* or more mestic support ob uptcy case. at for cases filed co ots. y any creditor a to of \$600 or more a	e in one or mo ligations, such on or after the e stal of \$600 or	or more? re payments and to as child support and the date of adjustment more?	the total amount you and alimony. Also, do t.
	Creditor'	s Name and	I Address	Dates of paymo	ent	Total amount	Amount y		payment for

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7.	Within 1 year before you filed for bankruptor Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ortners; relatives of any general control, or owner of 20% or	eral partners; partner r more of their voting	erships of which g securities; and	you are a general any managing a	al partner; corporations gent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cost		ments or transfer a	any property or	account of a d	ebt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes, Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of th	ne case
	Case number LVNV FUNDING, LLC v KING, SHEENA GV21000184-00	Warrant In Debt	Sussex County General Distric PO Box 1399 Sussex, VA 23	t Court	■ Pending □ On appe	eal
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, f	oreclosed, gar	nished, attached	d, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Da	te	Value of the
		Explain what happened	l			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		uding a bank or fir	nancial instituti	on, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Da tak	te action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a ■ No □ Yes		rty in the possess			efit of creditors, a

Debtor 1 Sheena Monique Hatch

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Pai	t 5: List Certain Gifts and Contributions	3			
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ıptcy,	did you give any gifts with a total value of more the	han \$600 per person′	?
	Gifts with a total value of more than \$600 per person	0	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a tota	l value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling? ■ No □ Yes. Fill in the details.	otcy o	r since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	how the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or pr	repar	did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Abacus Credit Counseling 17337 Ventura Boulevard Suite 226 Encino, CA 91316		\$25 for Online credit counseling course	08/26/2021	\$25.00
	Kane & Papa, P.C. P.O. Box 508 Richmond, VA 23218-0508 jkane@kaneandpapa.com		\$1750.00 for legal fees, Court filing fee, credit report	8/27/21	\$1,750.00

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Debtor 1 Sheena Monique Hatch

Case number (if known) 21-32634

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li No	or to make payments			or transfer any proper	ty to anyone who
	☐ Yes. Fill in the details. Person Who Was Paid Address	Description and va	alue of any prop	erty	Date payment or transfer was	Amount of payment
					made	
18.	Within 2 years before you filed for bankruptcy			sfer any prop	erty to anyone, other	than property
	transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already I	e as security (such as th		ecurity interes	st or mortgage on your p	property). Do not
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer	Description and ve	alue of	Doscribo	any proporty or	Date transfer was
	Address	Description and va property transferre			any property or received or debts change	made
	Person's relationship to you					
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No					
	☐ Yes. Fill in the details.					
	Name of trust	Description and va	alue of the prop	erty transferr	ed	Date Transfer was made
Par	8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial accoun	ts; certificates o	of deposit; sh		,
		ast 4 digits of account number	Type of accour instrument	clc mc	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea	ar before you filed for	bankruptcy, any	/ safe deposi	t box or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before yo	ou filed for bankruptcy	/?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St		Describe the	contents	Do you still have it?
		State and ZIP Code)	,			

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Debtor 1 Sheena Monique Hatch

Case number (if known) 21-32634

Par	9: Identify Property You Hold or Control for	r Someone Else			
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you l	porrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Descri	ibe the property	Value
Par	10: Give Details About Environmental Inform	nation			
For	he purpose of Part 10, the following definitions	s apply:			
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, groun			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	-	law, wh	ether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste,	hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	you know about, regardless of whe	n they o	ccurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under	or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		vironmental law, if you ow it	Date of notice
25.	Have you notified any governmental unit of an	y release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		vironmental law, if you ow it	Date of notice
26.	Have you been a party in any judicial or admin	istrative proceeding under any env	ironmer	ntal law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	e of the case	Status of the case
Par	11: Give Details About Your Business or Co	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the	e following connections to an	y business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either f	ull-time or part-time	
	☐ A member of a limited liability compan	y (LLC) or limited liability partnersh	nip (LLP))	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execu	utive of a corporation			
	☐ An owner of at least 5% of the voting of	or equity securities of a cornoration			

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Case number (if known) 21-32634

are tr with a 18 U. /s/ S She Sign Date	ue and correct. I understand that making a bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571. Sheena Monique Hatch ena Monique Hatch ature of Debtor 1 August 27, 2021 ou attach additional pages to Your Statem	Signature of Debtor 2 Date	obtaining money or property by fraud in connection ears, or both.
/s/ S She Sign	ue and correct. I understand that making a a bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571. Sheena Monique Hatch ena Monique Hatch ature of Debtor 1	\$250,000, or imprisonment for up to 20 your second	obtaining money or property by fraud in connection
are tr with a 18 U. /s/ S She	ue and correct. I understand that making a a bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571. Sheena Monique Hatch ena Monique Hatch	\$250,000, or imprisonment for up to 20 yo	obtaining money or property by fraud in connection
are tr with a 18 U.	ue and correct. I understand that making as bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571.		obtaining money or property by fraud in connection
	a read the answers on this Statement of Fi	nancial Affairs and any attachments, and	I declare under penalty of perjury that the answers
Part	12: Sign Below		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
[■ No □ Yes. Fill in the details below.		
	Within 2 years before you filed for bankrup	otcy, did you give a financial statement to	anyone about your business? Include all financial
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN. Dates business existed
·	Yes. Check all that apply above and fi Business Name	Il in the details below for each business. Describe the nature of the business	Employer Identification number
	_		
	No. None of the above applies. Go to		

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:			
Debtor 1	Sheena Monique	Hatch			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case number	21-32634				
(if known)				☐ Check if this is an amended filing	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Sheena Monique Hatch	Case number (if known)	21-32634
name: Descrip	tion of	☐ Retain the property and redeem it. ☐ Retain the property and enter into a	☐ Yes
property		Reaffirmation Agreement.	
securing		☐ Retain the property and [explain]:	_
or any un	rmation below. Do not list real estate lea	Leases but listed in Schedule G: Executory Contracts and Unexpire ases. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)(e lease period has not yet ended.
Describe	your unexpired personal property lease	es	Will the lease be assumed?
Lessor's n	ame:		□ No
	n of leased		_
Property:			☐ Yes
Lessor's n	ame:		□ No
Descriptio Property:	n of leased		E.v.
riopeity.			☐ Yes
Lessor's n			□ No
Descriptio Property:	n of leased		☐ Yes
Lessor's n	ame: n of leased		□ No
Property:	ii oi leaseu		☐ Yes
Lessor's n			□ No
Descriptio Property:	n of leased		☐ Yes
-1 - 7			La res
Lessor's n	ame: n of leased		□ No
Property:	To Toucou		☐ Yes
Lessor's n			□ No
Descriptio Property:	n of leased		☐ Yes
Part 3:	Sign Below		
Jnder pen	<u> </u>	cated my intention about any property of my estate that se	ecures a debt and any personal
	heena Monique Hatch	X	
Shee	ena Monique Hatch ature of Debtor 1	Signature of Debtor 2	
Date	August 27, 2021	Date	

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United States Bankruptcy Court Eastern District of Virginia

In re	Sheena Monique Hatch			21-32634
		Debtor(s)	Chapter	7

	IN A CHAPTER 13 CASE	
	(for use in the Richmond Division only)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) an compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection wi bankruptcy case is as follows:	
	For legal services, I have agreed to accept \$ 1,375.00	
	Prior to the filing of this statement I have received \$ 1,375.00	
	Balance Due	
2.	The source of the compensation paid to me was:	
	\blacksquare Debtor \square Other (specify)	
3.	The source of compensation to be paid to me is:	
	\blacksquare Debtor \square Other (specify)	
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law	firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.	A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, as required by Local Bankruptcy Rule 2016-1(C)(3).	
6.	I am electing to request compensation and reimbursement of expenses in this case:	
	a. ■ In accordance with the "no-look" fee set forth in Local Bankruptcy Rule 2016-1(C)(1)(a) and (C)(3)(a).	
	b. \square By submitting applications for compensation in the manner set forth in Local Bankruptcy Rule 2016-1(C)(1)(c)(ii).	
	An attorney for the debtor that fails to make the election to request compensation pursuant to Local Bankruptcy Rule 2016-1(C)(1)(a) (C)(3)(a) at the commencement of the case will be deemed to have elected to request compensation in the manner set forth within Loc	

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CERTIFICATION

I certify that the foregoing is an accurate statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

August 27, 2021	/s/ James E. Kane
Date	James E. Kane 30081
	Signature of Attorney
	Kane & Papa, P.C.
	Name of Law Firm
	P.O. Box 508
	Richmond, VA 23218-0508
	804-225-9500 Fax: 804-225-9598

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

TRU	OF OF SERVICE
ę ,	foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class
Date	Signature of Attorney

Debtor 1 Sheena Monique Hatch Debtor 2 (Crown, Himing) United States Bankruptcy Court for the: Eastern District of Virginia Case number 21-32634 (if Nown) United States Bankruptcy Court for the: Eastern District of Virginia Case number 21-32634 (if Nown) Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income Ba as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, auditional pages service, complete and ascurate and filis distance of Exemption from Presumption of abuse because you do not have primarily consumer debts or because of qualified military service but it could apply later. Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income Ba as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, audition a service of the presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse brades 9 707(b)(2) (Official Form 122A-15upp) with this form. 1. What is your marital and filling status? Check one only. Not married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is filling with you. For and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B). Fill in the average monthly income that you and your spouse are legally separated. Fill out Column A, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11, to not fill out Column B, by checking this box, you d									
Debtor 2 (\$9006, if firing) United States Bankruptcy Court for the: Eastern District of Virginia Case number 21-32634 If Knowns 21-32634 If Kn		···				only as d	irected i	n this form and	in Form
United States Bankruptcy Court for the: Eastern District of Virginia 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Caclulation (Official Form 122A-2). 3. The Means Test does not apply now because of qualified military service but it could apply later. Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling 2. The Check if this is an amended filling state 2. The Check if this is an amended filling state is applied to the check properties of the check properties of the check properties 2. The Check if this is an amended filling state 2. The Check if this is an amended filling state is a check the this form. Include the line number to which the additional information applies. We put amen acase number (if known), if you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of the check in the put and your specified from a presumption of Abuse Under \$707(b)/2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filling status? Check one only. Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is filling with you. You and your spouse are legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out both Columns A by checking thi	Debt	or 1 Sheena Monique Hatch			' '				
Case number 21-32634 (If brown)		<u> </u>			■ 1. There i	s no pres	umption	of abuse	
Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income Per as complete and accurate as possible. If two married people are filing together, both are sequally responsible for being accurate. If more space is needed, attach a separate eheet to this form. Include the line number for which the additional information apples. On the top of any additional pages, write your name and case number (if known), if you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying millitary service, complete and file Statement of Exemption Trom Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Port 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living apparately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(8). Fill in the average monthly income that you received from all accurace, derived during the fell unique to the months of the			inia	_	applie	s will be n	nade und	der <i>Chapter 7 N</i>	•
Chapter 7 Statement of Your Current Monthly Income Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name are number (if known). If you believe that you are exempted from a presumption of abuse because you do not have infantially contained to the property of the	l .							117	
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Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)/2) (Official Form 122A-15upp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filling status? Check one only. Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is filling with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11: do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B), To example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any neone. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have northing to report for any line, write \$0 in the space. 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payorll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in	Off	icial Form 122A - 1						J	
attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filling status? Check one only. Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filling with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C.§ 101(10A). For example, if you are filling on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write 50 in the space. Column A Debtor 1 Quality A Column B is filled in the space of your household expenses of your royour dependents, including child support. Include regular contributions			nt Mor	nthly In	come				04/20
Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 foult months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all if bombis, add the income for all if bombis and divide the total by 6. Fill in the result. Do not include princemount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write §0 in the space. Column A Debtor 1 Column B Debtor 1 Debtor 2 Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from a numarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) \$\int 0.00 \$\int 0.00 \$\int	attach case r qualify	a separate sheet to this form. Include the line number to which number (if known). If you believe that you are exempted from a pying military service, complete and file Statement of Exemption	the addition resumption	nal information of abuse beca	n applies. On th ause you do no	e top of a	ny addition	onal pages, write nsumer debts or	your name and because of
Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. ■ Married and your spouse is NOT filling with you. You and your spouse are: ■ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 1011(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1	1.	What is your marital and filing status? Check one only.							
■ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Column B Debtor 2 or non-filling spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses		☐ Not married. Fill out Column A, lines 2-11.							
■ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 full months of full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Column B Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income fro		☐ Married and your spouse is filing with you. Fill out bot	th Columns	A and B, line	es 2-11.				
Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Column B Debtor 2 or non-filling spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses		■ Married and your spouse is NOT filing with you. You	and your s	spouse are:					
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Official Form 122A-1

Debtor 1 0.00

0.00 Copy here -> \$

0.00

0.00

0.00

\$

-\$

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

0.00

0.00

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Sheena Monique Hatch Case number (if known) 21-32634 Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 1,215.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seg.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below... 0.00 0.00 0.00 \$ 0.00 Total amounts from separate pages, if any. \$ 0.00 \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 1,215.00 5.459.00 6.674.00 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 6,674.00 Multiply by 12 (the number of months in a year) **x** 12 80.088.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: VA Fill in the state in which you live. 4 Fill in the number of people in your household. 116.328.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Sheena Monique Hatch **Sheena Monique Hatch**

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Debtor 1	Sheena Monique Hatch	Case number (if known)	21-32634	
	Signature of Debtor 1			
Da	August 27, 2021 MM / DD / YYYY			
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this form	m.		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Ad Astra Recovery 7330 West 33rd Street North Suite 118 Wichita, KS 67205

Klima Peters & Daly PC 8028 Ritchie Hwt Suite 300 Pasadena, MD 21122

LVNV Funding LLC ATTN BANKRUPTCY 200 Meeting Street, Ste #206 Greenville, SC 29601

Medical Data Systems Inc Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960

Merrick Bank/CardWorks Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804

Mw Fidel Svc 103 S Main Street Ottawa, KS 66067

National Credit Adjusters, LLC 327 West 4th Avenue Po Box 3023 Hutchinson, KS 67504

Navient Attn: Claims Dept Po Box 9500 Wilkes-Barre, PA 18773

Peoples Advantage Credit Union Attn: Bankruptcy Po Box 3180 Petersburg, VA 23805 Receivable Management Inc 7206 Hull Road Suite 211 Richmond, VA 23235

Resurgent Capital Services Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

Synchrony Bank/Gap Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Total Visa/The Bank of Missouri Attn: Bankruptcy Po Box 85710 Sioux Falls, SD 57118

USDOE/GLELSI Attn: Bankruptcy Po Box 7860 Madison, WI 53707